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|---|---|---|-----------------------------------|----------|------|
| <b>AMENDMENT TRANSMITTAL LETTER</b>   |   |   | Docket No.<br>4918-0102PUS1       |          |      |
| Application No.<br>10/534,459-Conf. #6940   | Filing Date<br>May 11, 2005               | Examiner<br>A. Eoff                     | Art Unit<br>1795                  |          |      |
| Applicant(s): Hiroshi KURAKATA  |   |   |                                   |          |      |
| Invention: RADIATION SENSITIVE RESIN COMPOSITION  |   |   |                                   |          |      |
| <b>MS Amendment</b><br><b>Commissioner for Patents</b><br><b>P.O. Box 1450</b><br><b>Alexandria, VA 22313-1450</b>  |   |   |                                   |          |      |
| Transmitted herewith is an amendment in the above-identified application.   |   |   |                                   |          |      |
| The fee has been calculated and is transmitted as shown below.  |   |   |                                   |          |      |
| <b>CLAIMS AS AMENDED</b>  |   |   |                                   |          |      |
|   | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate     |      |
| <b>Total Claims</b>   | 21  | - 22 =                                  | 0                                 | x 52.00  | 0.00 |
| <b>Independent<br/>Claims</b>   | 3   | - 3 =                                   | 0                                 | x 220.00 | 0.00 |
| <b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>   |   |   |                                   |          |      |
| <b>Other fee (please specify):</b>  |   |   |                                   |          |      |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>   |   |   |                                   |          | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <span style="float: right;"><input type="checkbox"/> Small Entity</span>   |   |   |                                   |          |      |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment.   |   |   |                                   |          |      |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.<br>A duplicate copy of this sheet is enclosed.  |   |   |                                   |          |      |
| <input type="checkbox"/> A check in the amount of \$ _____ is enclosed.   |   |   |                                   |          |      |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |   |   |                                   |          |      |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u><br>as described below. A duplicate copy of this sheet is enclosed.        |   |   |                                   |          |      |
| <input checked="" type="checkbox"/> Credit any overpayment.   |   |   |                                   |          |      |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.  |   |   |                                   |          |      |
| <br><b>GARTH M. DAHLEN</b><br><b>USPTO #43,575</b>  |   |   | Dated: <b>JAN 11 2010</b>         |          |      |
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